



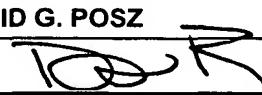
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. **01-442**First Inventor or Application Identifier **SATO et al.**Title **HYBRID COMPRESSOR AND CONTROL DEVICE**Express Mail Label No. **21070714095**

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450																										
<p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 33] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention -Brief Description of the Drawings -Detailed Description of the Preferred Embodiment -Claims -Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 8] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small></p> <p>NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</p>		<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p>																										
ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small> <small>*Small Entity Statement(s)</small> <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired 13. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 14. <input type="checkbox"/> Other: 15. <input type="checkbox"/> Other: 																												
<p>16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <input type="checkbox"/> of prior application No: _____ <small>Prior application information: Examiner _____</small></p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																												
17. CORRESPONDENCE ADDRESS <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label  <small>(Insert Customer No. or Attach bar code label here)</small> <input type="checkbox"/> Correspondence address below</p> <p>23400</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="width: 50%;">Name</td> <td colspan="3" style="width: 50%;">PATENT TRADEMARK OFFICE</td> </tr> <tr> <td colspan="2" style="height: 40px;"></td> <td colspan="3"></td> </tr> <tr> <td colspan="2" style="width: 50%;">Address</td> <td colspan="3"></td> </tr> <tr> <td colspan="2" style="width: 50%;">City</td> <td style="width: 10%;">State</td> <td style="width: 10%;">Zip Code</td> <td style="width: 10%;"></td> </tr> <tr> <td colspan="2">Country</td> <td>Telephone</td> <td>(703) 707-9110</td> <td>Fax (703) 707-9112</td> </tr> </table>				Name		PATENT TRADEMARK OFFICE								Address					City		State	Zip Code		Country		Telephone	(703) 707-9110	Fax (703) 707-9112
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Name (Print/type)	DAVID G. POSZ		Registration No. (Attorney/Agent)	37,701
Signature			Date	July 9, 2003

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